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APPLICANTS

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** CONTINUING DATA *****
 NONE

** FOREIGN APPLICATIONS *****
 NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance  Examiner's Signature Initials	STATE OR COUNTRY OH	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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ADDRESS

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TITLE

Peripheral marker of blood brain barrier permeability

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